Case 08-46415 Doc 35

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Page 1 of 1

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Check Number 1011 Dated 08/18/11 Case Number 08-46415 - WILLIAMS, LORI JOAN

Creditor	Claim No.	Amount Allowed	Amount Paid
PULMONARY & CRITICAL CARE ASSOCIATION 225 N SMITH AVE STE 300 ST PAUL, MN 55102	000006	11.00	0.37
LABCORP PO BOX 2240 BURLINGTON, NC 27216	000007	20.00	0.67
DR ERICKSON DDS 825 S 8TH ST #12196 MINNEAPOLIS, MN 55404	000011	75.00	2.50
PARK DENTAL 12904 CENTRAL AVENUE NORTH EAST BLAINE, MN 55434 Remittance Total	000012	89.80	2.99
		195.80	6.53

TIMOTHY D. MORATZKĄ